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PLACE OF BIRTH	ARIZONA STAT	TE BOARD OF HEALTH
nty of BUREAU BUREAU	OF VITAL STATISTICS	State Index No.
rict of Slobe ORIGINAL	L CERTIFICATE OF BIRTH	Co. Registrar No. 17 2
n of		Local Registrar's No
of Sloby (No.		CI W N
20 M: (	1	
I NAME OF CHILD WELLE If child is not named, make Supplemental Report	orena Ram	Idua Born YES
of Twin,		istrar. (Alive) Note of
Triplet   and	1	(Month) (Day) (Yr.)
FATHER Carrieles	Full Maiden	MOTHER
lence P	Name Trace Residence	cis Clex
Age at last 27	Color	Age at last / C
ice Birthday (Years)	or Race	Birthday (Years)
place Tex.	Birthplace ac	ren
pation Randley	Occupation Hocc	servite
ber of Child Number of children of this mother now livi		ions taken against his neonatorum?
CERTIFICATE OF ATT	ENDING PHYSICIAN OR MID	WIFE*
by certify that I attended the birth of the above	re child, and that it occurred on	nor 2 2 1922, at 8QM.
When there is no attending physi-	(Signature) RX	Zune di
n or midwife, then the householder and make this return.	(Attending phy)	sician, midwife, householder.*)
liven or Christian name added from a	Address 2	de
mental report 192 Filed VO	V251922 BC	8804
	. ∧A True Copy ✓	LOCAL REGISTRAR.
COUNTY REGISTRAR. Filed Oak	6 1922	COUNTY REGISTRAR.
COUNT INSCRIPTION.		COUNTY TERROTOTIVE.